

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

STRAIGHT TALK AMERICA

ADDRESS (number and street)

PO Box 9785

☐Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22304

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00413245

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2007

through

08

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Keith Davis

Signature of Treasurer

Electronically Filed by Keith Davis

Date

09

20

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
STRAIGHT TALK AMERICA

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		33386.58
(b) Cash on Hand at Beginning of Reporting Period	1707.68	
(c) Total Receipts (from Line 19)	40033.00	149288.39
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41740.68	182674.97
7. Total Disbursements (from Line 31)	20425.44	161359.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21315.24	21315.24
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	10525.86	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	178828.72	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

STRAIGHT TALK AMERICA

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	40000.00	104000.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	33.00	2720.38
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	40033.00	106720.38
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	40033.00	131720.38
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	376.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	17191.41
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	40033.00	149288.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	40033.00	149288.39

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	20425.44	191009.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	20425.44	191009.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	-12500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	100.00
29. Other Disbursements.....	0.00	-17250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	20425.44	161359.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	20425.44	161359.73

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	40033.00	131720.38
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40033.00	131620.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20425.44	191009.73
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	376.60
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20425.44	190633.13

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 24

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
 Mrs. Patricia J. Bloomfield

Mailing Address 940 1st St

City State Zip Code
Manhattan Beach CA 90266

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Civic Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.97593

Amount of Each Receipt this Period

5000.00

Contribution

B. Full Name (Last, First, Middle Initial)

Mr. William E. Bloomfield, Jr.

Mailing Address 940 1st Street

City State Zip Code
Manhattan Beach CA 90266-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Web Service Company

Occupation
 Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.97594

Amount of Each Receipt this Period

5000.00

Contribution

C. Full Name (Last, First, Middle Initial)

Mr. Dan Crippen

Mailing Address 5137 Massachusetts Ave.

City State Zip Code
Bethesda MD 20816

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self Employed

Occupation
 Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.97596

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
Mr. Richard H. Davis
Mailing Address 1905 Mallinson Way

City State Zip Code
Alexandria VA 22308-2760

FEC ID number of contributing
federal political committee.

C

Name of Employer
Davis Manafort

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.97598

Amount of Each Receipt this Period

5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mr. John F. Lehman, Jr.
Mailing Address 450 Park Ave
Fl 6

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
JF Lehman and Co.

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.97599

Amount of Each Receipt this Period

5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Peter Malone
Mailing Address 149 Randolph Avenue

City State Zip Code
Milton MA 02186-3524

FEC ID number of contributing
federal political committee.

C

Name of Employer
CSP Associates, Inc.

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.97601

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)

Mr. Paul J. Manafort, Jr.

Mailing Address 9357 Mount Vernon Circle

City State Zip Code
 Alexandria VA 22309

FEC ID number of contributing
federal political committee.

C

Name of Employer
Davis Manafort

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.97602

Amount of Each Receipt this Period

5000.00

Contribution

B. Full Name (Last, First, Middle Initial)

Mr. Solomon D. Trujillo

Mailing Address 8400 E. Crescent Pkwy
 Ste 600

City State Zip Code
 Greenwood Village CO 80111-2842

FEC ID number of contributing
federal political committee.

C

Name of Employer
Telstra Corp. Ltd.

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.97603

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

40000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Credit Card Payment (See Attached Memos)

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97581

Date of Disbursement

08 / 24 / 2007

Amount of Each Disbursement this Period

86.55

B. US Postal Service

Mailing Address 1100 Wythe Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97581.1

Date of Disbursement

08 / 24 / 2007

Amount of Each Disbursement this Period

69.60

[MEMO ITEM]

C. Care First Blue Cross Blue Shield

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279

Purpose of Disbursement
Health Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97578

Date of Disbursement

08 / 24 / 2007

Amount of Each Disbursement this Period

460.00

SUBTOTAL of Disbursements This Page (optional)

546.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Connell Donatelli, Inc.		Transaction ID: SB21B.97572 Date of Disbursement <div> <div>08</div> <div>24</div> <div>2007</div> </div>	
Mailing Address PO Box 1877		Amount of Each Disbursement this Period <div>6725.00</div>	
City Alexandria State VA Zip Code 22313	Purpose of Disbursement Website Expense Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) IDMI		Transaction ID: SB21B.97573 Date of Disbursement <div> <div>08</div> <div>24</div> <div>2007</div> </div>	
Mailing Address 490 White Pond Drive		Amount of Each Disbursement this Period <div>2659.17</div>	
City Akron State OH Zip Code 44320	Purpose of Disbursement Database File Maintenance Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Michael E. Jaconi		Transaction ID: SB21B.97585 Date of Disbursement <div> <div>08</div> <div>23</div> <div>2007</div> </div>	
Mailing Address 1615 33rd Street, NW		Amount of Each Disbursement this Period <div>180.22</div>	
City Washington State DC Zip Code 20007	Purpose of Disbursement Parking (See Attached Text) Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

9564.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Mini U Storage

Mailing Address 500 S. Pickett Street

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Storage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97575

Date of Disbursement

08 / 03 / 2007

Amount of Each Disbursement this Period

119.00

Full Name (Last, First, Middle Initial)

B. National City Bank

Mailing Address PO Box 5756

City Akron State OH Zip Code 44101

Purpose of Disbursement
Bank Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97582

Date of Disbursement

08 / 20 / 2007

Amount of Each Disbursement this Period

21.66

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 7450 Tilghman St., Ste. 107

City Allentown State PA Zip Code 18106-9037

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97576

Date of Disbursement

08 / 10 / 2007

Amount of Each Disbursement this Period

85.95

SUBTOTAL of Disbursements This Page (optional)

226.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Sprint PCS

Mailing Address PO Box 1769

City Newark State NJ Zip Code 07101-1769

Purpose of Disbursement
Telephone - Cellular

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97580

Date of Disbursement

08 / 24 / 2007

Amount of Each Disbursement this Period

70.75

Full Name (Last, First, Middle Initial)

B. Strategic Telecommunications

Mailing Address 7591 9th Street North

City Oakdale State MN Zip Code 55128

Purpose of Disbursement
Telemarketing

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97574

Date of Disbursement

08 / 24 / 2007

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)

10070.75

TOTAL This Period (last page this line number only)

20408.30

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 / 24

FOR LINE NUMBER:
(check only one)

<input checked="checked" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
HEATHER WILSON FOR CONGRESS

Nature of Debt (Purpose):
Travel - Airfare and Lodging

Mailing Address PO Box 14070

City	State	ZIP Code
Albuquerque	NM	87191

Outstanding Balance Beginning This Period

454.80

Transaction ID: SD9.96368

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

454.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Karen Floyd 2006 Campaign

Nature of Debt (Purpose):
Travel-Airfare

Mailing Address 113 West Main Street

City	State	ZIP Code
Spartanburg	SC	29306

Outstanding Balance Beginning This Period

791.23

Transaction ID: SD9.96364

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

791.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE DEWINE FOR US SENATE

Nature of Debt (Purpose):
Travel-Airfare

Mailing Address PO Box 340188

City	State	ZIP Code
Columbus	OH	43234

Outstanding Balance Beginning This Period

9279.83

Transaction ID: SD9.96363

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9279.83

1) **SUBTOTALS** This Period This Page (optional).....

10525.86

2) **TOTALS** This Period (last page this line number only).....

10525.86

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 / 24

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caplin & DrysdaleNature of Debt (Purpose):
Consultant-Legal

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

555.05

Transaction ID: SD10.97158

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

555.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caplin & DrysdaleNature of Debt (Purpose):
Consulting-Legal

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

1017.91

Transaction ID: SD10.97383

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1017.91

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caplin & DrysdaleNature of Debt (Purpose):
Consultant-Legal

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

37.00

Transaction ID: SD10.97376

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

37.00

1) SUBTOTALS This Period This Page (optional).....

1609.96

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 / 24

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caplin & DrysdaleNature of Debt (Purpose):
Consultant-Legal

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

630.00

Transaction ID: SD10.97441

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

630.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Connell Donatelli, Inc.Nature of Debt (Purpose):
Email List Purchase

Mailing Address PO Box 1877

City State ZIP Code
Alexandria VA 22313

Outstanding Balance Beginning This Period

6725.00

Transaction ID: SD10.97377

Amount Incurred This Period

0.00

Payment This Period

6725.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Huckaby Davis LiskerNature of Debt (Purpose):
Compliance Consultant

Mailing Address 228 S. Washington St., Suite 115

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD10.97435

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) SUBTOTALS This Period This Page (optional).....

1630.00

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Huckaby Davis Lisker

Nature of Debt (Purpose):
Compliance Consultant

Mailing Address 228 S. Washington St., Suite 115

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD10.97424

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Huckaby Davis Lisker

Nature of Debt (Purpose):
Compliance Consultant

Mailing Address 228 S. Washington St., Suite 115

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD10.97547

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Huckaby Davis Lisker

Nature of Debt (Purpose):
Compliance Consultant

Mailing Address 228 S. Washington St., Suite 115

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97587

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) SUBTOTALS This Period This Page (optional).....

3000.00

2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMI

Nature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

45981.37

Transaction ID: SD10.97426

Amount Incurred This Period

0.00

Payment This Period

2659.17

Outstanding Balance at Close of This Period

43322.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMI

Nature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

140.00

Transaction ID: SD10.97479

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMI

Nature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

720.34

Transaction ID: SD10.97484

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

720.34

1) **SUBTOTALS** This Period This Page (optional).....

44182.54

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMINature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

140.00

Transaction ID: SD10.97548

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMINature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97588

Amount Incurred This Period

6413.44

Payment This Period

0.00

Outstanding Balance at Close of This Period

6413.44

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Courtney NahigianNature of Debt (Purpose):
Salary

Mailing Address 331 Cameron Station Blvd.

City State ZIP Code
Alexandria VA 22304

Outstanding Balance Beginning This Period

3201.90

Transaction ID: SD10.97423

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3201.90

1) SUBTOTALS This Period This Page (optional).....

9755.34

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Courtney NahigianNature of Debt (Purpose):
Salary

Mailing Address 331 Cameron Station Blvd.

City State ZIP Code
Alexandria VA 22304

Outstanding Balance Beginning This Period

3201.90

Transaction ID: SD10.97485

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3201.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Courtney NahigianNature of Debt (Purpose):
Salary

Mailing Address 331 Cameron Station Blvd.

City State ZIP Code
Alexandria VA 22304

Outstanding Balance Beginning This Period

3201.90

Transaction ID: SD10.97546

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3201.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Courtney NahigianNature of Debt (Purpose):
Salary

Mailing Address 331 Cameron Station Blvd.

City State ZIP Code
Alexandria VA 22304

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97586

Amount Incurred This Period

3201.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

3201.90

1) SUBTOTALS This Period This Page (optional).....

9605.70

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
PaychexNature of Debt (Purpose):
Employer Contribution Pay-
roll Taxes

Mailing Address 7450 Tilghman St., Ste. 107

City State ZIP Code
Allentown PA 18106-9037

Outstanding Balance Beginning This Period

1642.35

Transaction ID: SD10.97428

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1642.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PaychexNature of Debt (Purpose):
Employer Contribution Pay-
roll Taxes

Mailing Address 7450 Tilghman St., Ste. 107

City State ZIP Code
Allentown PA 18106-9037

Outstanding Balance Beginning This Period

1642.35

Transaction ID: SD10.97481

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1642.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PaychexNature of Debt (Purpose):
Employer Contribution Pay-
roll Taxes

Mailing Address 7450 Tilghman St., Ste. 107

City State ZIP Code
Allentown PA 18106-9037

Outstanding Balance Beginning This Period

1642.35

Transaction ID: SD10.97549

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1642.35

1) SUBTOTALS This Period This Page (optional).....

4927.05

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
PaychexNature of Debt (Purpose):
Employer Contribution Pay-
roll Taxes

Mailing Address 7450 Tilghman St., Ste. 107

City State ZIP Code
Allentown PA 18106-9037

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97589

Amount Incurred This Period

1642.35

Payment This Period

0.00

Outstanding Balance at Close of This Period

1642.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Richard Quinn & AssociatesNature of Debt (Purpose):
Consultant-Polling

Mailing Address 1600 Gervais Street

City State ZIP Code
Columbia SC 29201

Outstanding Balance Beginning This Period

26725.00

Transaction ID: SD10.97204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26725.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Southwest Publishing and Mailing Corp.Nature of Debt (Purpose):
Direct Mail-Postage/Produ-
ction

Mailing Address 2600 NW Topeka Blvd.

City State ZIP Code
Topeka KS 66617

Outstanding Balance Beginning This Period

36276.23

Transaction ID: SD10.86868

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36276.23

1) SUBTOTALS This Period This Page (optional).....

64643.58

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Southwest Publishing and Mailing Corp.Nature of Debt (Purpose):
Direct Mail-Postage/Produ-
ction

Mailing Address 2600 NW Topeka Blvd.

City State ZIP Code
Topeka KS 66617

Outstanding Balance Beginning This Period

16648.18

Transaction ID: SD10.96351

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16648.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Southwest Publishing and Mailing Corp.Nature of Debt (Purpose):
Direct Mail-Postage/Produ-
ction

Mailing Address 2600 NW Topeka Blvd.

City State ZIP Code
Topeka KS 66617

Outstanding Balance Beginning This Period

9770.77

Transaction ID: SD10.97482

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9770.77

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic TelecommunicationsNature of Debt (Purpose):
Telemarketing

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

20822.60

Transaction ID: SD10.96353

Amount Incurred This Period

0.00

Payment This Period

10000.00

Outstanding Balance at Close of This Period

10822.60

1) SUBTOTALS This Period This Page (optional).....

37241.55

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic Telecommunications

Nature of Debt (Purpose):
Telemarketing

Mailing Address 7591 9th Street North

City	State	ZIP Code
Oakdale	MN	55128

Outstanding Balance Beginning This Period

2233.00

Transaction ID: SD10.97483

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2233.00

1) SUBTOTALS This Period This Page (optional).....

2233.00

2) TOTALS This Period (last page this line number only).....

178828.72

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Form/Schedule: **F3XN**

Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures disclosed on Schedule B, Line 21b were made on behalf of any specifically identified federal candidate. All expenditures made on behalf of a specifically identified federal candidate have been disclosed on Schedule B, Line 23. 11 CFR 104.3 (b) and 106.1 2) No expenditures disclosed on Schedule B, Line 21b were made for public communications (as defined by 11 CFR 100.26) or voter drive activity (under 11 CFR 106.6(b)(2)(i)) containing express advocacy as defined under 11 CFR 100.-22 and thus did not constitute in-kind contributions or independent expenditures. 3) The committee has reviewed all travel and subsistence expenditures, and reviewed the reporting requirements outlined at 11 CFR 104.9 and in the instructions for Schedule B. There is no further itemization required under any Commission regulation for these expenditures.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.97585**

This check was originally issued to Michael E. Jaconi on July 12, 2006 (See FEC-241826, Tran ID# SB21B.58347, SB21B.58402) and not timely cashed. The check was then voided on July 23, 2007 (See FEC-301859, Tran ID# SB21B.97550) The bank subsequently cashed the check on August 23, 2007; thus we are disclosing it on this report.